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1660 Lincoln Street, Suite 2050
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Facsimile (303) 894-9239

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DATE: May 10, 2006

PTO IDENTIFIER: Application Number 10/684045-Conf. #3260
Patent Number

Inventor: Steven L. Holcombe et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: PATTON BOGGS LLP

James M. Graziano

PHONE: (303) 830-1776

Attorney Dkt. #: 013227.0101C1US (Formerly 13227.101C1 (.202))

PAGES (Including Cover Sheet): 16

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PTO/SB/87 (09-04)

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Application No. (if known): 10/684045

Attorney Docket No.: 013227.0101C1US
(Formerly 13227.101C1 (.202))

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1. Amendment in Response to Non-Final Office Action mailed 02/10/2006 (10 pages)
2. Terminal Disclaimer Form PTO/SB/26 (1 page)
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Effective on 12/08/2004.
Fee pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** **(S)** **130.00**

Complete # Known	
Application Number	10/884045-Conf. #3280
Filing Date	October 10, 2003
First Named Inventor	Steven L. Holcombe
Examiner Name	A. W. Kindred
Art Unit	2163
Attorney Docket No.	013227.0101C1US (Formerly 13227.101C1 (.202))

METHOD OF PAYMENT (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
-20 =	x	=				

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-3 =	x	=	

3. APPLICATION SIZE FEE	Fee (\$)	Fee Paid (\$)
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).	50	25

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x		

4. OTHER FEE(S)	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1814 Statutory Disclaimer	130.00

SUBMITTED BY						
Signature	<i>James M. Graziano</i>	Registration No. (Attorney/Agent)	28,300	Telephone	(303) 830-1776	
Name (P/M/Type)	James M. Graziano			Date	May 10, 2006	

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Effective on 12/06/2004. Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4814).		Computer # K10404	
FEE TRANSMITTAL For FY 2005		Application Number	10/884045-Conf. #3280
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	October 10, 2003
TOTAL AMOUNT OF PAYMENT (5) 130.00		First Named Inventor	Steven L. Holcombe
		Examiner Name	A. W. Kradred
		Art Unit	2163
		Attorney Docket No.	015227.0101C1US (Formerly 13227.101G1, 1202)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

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 Fee (\$): Fee Paid (\$):

Independent Claims Extra Claims Fee (\$): Fee Paid (\$):
- 3 = x =

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Initial Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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Other (e.g., late filing surcharge): **1814 Statutory Disclaimer** **130.00**

SUBMITTED BY

Signature	<i>James M. Graziano</i>	Registration No. (Attorney/Agent)	28,300	Telephone	(303) 830-1776
Name (Print/Type)	James M. Graziano			Date	May 10, 2006

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